Attorney's Docket No.: 12325-002001 Client's Ref. No.:

the design of the second of th

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled SPATIAL LIGHT MODULATION, the specification of which:

[] wa [] wa	s described and claimed in F	erial No and was amended on PCT International Application No ended under PCT Article 19 on	filed on
	state that I have reviewed an	nd understand the contents of the about ndment referred to above.	ve-identified specification,
	wledge the duty to disclose a Federal Regulations, §1.56.	ll information I know to be material t	o patentability in accordance with
I hereby business in the Pa	appoint the following attornatent and Trademark Office of	neys and/or agents to prosecute this ap connected therewith:	pplication and to transact all
Charles Hieken, l Kenneth F. Kozil	Reg. No. 18,411 k, Reg. No. 36,572	Daniel S. Coolidge, Ro	eg. No. 46,071
Address	all telephone calls to CHAF	RLES HIEKEN at telephone number ((617) 542-5070.
Address	all correspondence to CHA	RLES HIEKEN at:	
225 Fra	RICHARDSON P.C. nklin Street MA 02110-2804		
on information at that willful false 1001 of Title 18	nd belief are believed to be t statements and the like so m	nade herein of my own knowledge are rue; and further that these statements ade are punishable by fine or imprisond that such willful false statements may be a statement of the statements of the statement of the	were made with the knowledge onment, or both, under Section
Full Name of Inv	ventor: MICHAEL MERN	1ELSTEIN	
Inventor's Signa			Date:
Residence Addre	0 1	chusetts	
Citizenship: Post Office Add	United States c/o Lightwave Inst	ruments LLC	
1 OSE OTHER AUG	.000. 0/0 101611177470 11101		

174 Brookline Street, Suite 3 Cambridge, MA 02139

Attorney's Docket No.: 12325-002001

Client's Ref. No.:

Combined Declaration and Power of Attorney Page 2 of 2 Pages

Full Name of Inventor:	ABRAHAM MCALLISTER	
Inventor's Signature:		Date:
Residence Address:	Cambridge, Massachusetts	
Citizenship:	United States	
Post Office Address:	c/o Lightwave Instruments, LLC	
	174 Brookline Street, Suite 3	
	Cambridge, MA 02139	
Full Name of Inventor:	CAMERON ABNET	
Inventor's Signature:		Date:
Residence Address:	Waltham, Massachusetts	
Citizenship:	United States	
Post Office Address:	c/o Lightwave Instruments, LLC	
	174 Brookline Street, Suite 3	
	Cambridge, MA 02139	
Full Name of Inventor:	DANIEL FELDKHUN	
Inventor's Signature:		Date:
Residence Address:	Brighton, Massachusetts	
Citizenship:	United States	
Post Office Address:	c/o Lightwave Instruments, LLC	
	174 Brookline Street, Suite 3	
	Cambridge, MA 02139	

20224223.doc